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PTO/SB/17 (07-07)  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816)  
Effective on 12/08/2004.

# FEE TRANSMITTAL For FY 2007

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$130.00

## Complete if Known

Application Number	10/731,722
Filing Date	December 9, 2003
First Named Inventor	Tran, Pascaline H.
Examiner Name	Brunsmann, David M.
Art Unit	1755
Attorney Docket No.	4621B

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 05-1070 Deposit Account Name: BASF Catalysts LLC.

For the above identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or any underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Multiple Dependent Claims		
Total Claims	Extra Claims	Fee (\$)
- 20 or HP =	x	\$50.00
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP =	x	\$200.00
HP = highest number of independent claims paid for, if greater than 3.		

Total Claims - 20 or HP = x \$50.00 = Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims - 3 or HP = x \$200.00 = Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	0	\$250.00	\$0.00
	/ 50	(round up to a whole number) x		

### 4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)





Other (e.g., late filing surcharge): Terminal Disclaimer \$130.00

## SUBMITTED BY

Signature	<i>Stuart D. Frenkel</i>	Registration No. (Attorney/Agent)	29,500	Telephone	703-246-9641
Name (Print/Type)	Stuart D. Frenkel	Date	September 17, 2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>4621B</b>									
Applicant(s): <b>Tran, et al.</b>														
Application No. <b>10/731,621 P</b>	Filing Date <b>December 9, 2003</b>	Examiner <b>Brunsmann, David M.</b>	Customer No. <b>48226</b>	Group Art Unit <b>1755</b>	Confirmation No. <b>5551</b>									
Invention: <b>Hydrothermally Stable Metal Promoted Zeolite Beta for NOx Reduction</b>														
<b>COMMISSIONER FOR PATENTS:</b>														
Transmitted herewith is an amendment in the above-identified application.														
The fee has been calculated and is transmitted as shown below.														
<b>CLAIMS AS AMENDED</b>														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	18 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>05-1070</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.														
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>														
 Signature			Dated: <b>September 17, 2007</b>											
<b>Stuart D. Frenkel</b> Reg. No. 29,500 Frenkel & Associates, P.C. 3975 University Drive, Suite 330 Fairfax, VA 22030 Phone: 703-246-9641 Facsimile: 703-246-9646			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="text-align: center;">September 17, 2007</td> <td style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">             Signature of Person Mailing Correspondence         </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <b>Stuart D. Frenkel</b>            Typed or Printed Name of Person Mailing Correspondence         </td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		September 17, 2007	(Date)	 Signature of Person Mailing Correspondence		<b>Stuart D. Frenkel</b> Typed or Printed Name of Person Mailing Correspondence	
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CC:														